PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax
(571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a corrected below or directed otherwise in Block 1.

maintenance fee notifical	tions.	erwise in block 1, by (a	i) specifying a new corre	spondence address;	and/or (b) indicating a sepa	trate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
25534	7590 04/28	/2010	nav	e its own certificate	of mailing or transmission.	
CAHN & SAMUELS LLP 1100 17th STREET NW SUITE 401				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
WASHINGTON	, DC 20036					(Depositor's name)
					· · · · · · · · · · · · · · · · · · ·	(Signature)
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	٠	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/830,144 04/21/2004 Johnson Jennifer 610.0002 7839 TITLE OF INVENTION: TOURNIQUET ARTICLE						
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	07/28/2010
EXAM	INER	ART UNIT	CLASS-SUBCLASS			
NGUYEN, VI X		3731	606-203000			
Address form PTO/SI	ondence address (or Cha 8/122) attached. ication (or "Fee Address 2 or more recent) attach	inge of Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
(A) NAME OF ASSIC Tactical	ess an assignee is ident h in 37 CFR 3.11. Comp GNEE Medical Sol	ified below, no assignee pletion of this form is NO Lutions, Inc	data will appear on the part of the part o	patent. If an assignation assignment. Y and STATE OR Con, SC	·	
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	Individual W Co	orporation or other private gr	oup entity Government
4a. The following fec(s) are submitted: 4b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Publication Fee (No small entity discount permitted) Advance Order - # of Copies 1 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).						
:	s SMALL ENTITY state	us. See 37 CFR 1.27.			LL ENTITY status. See 37 C	
interest as shown by the	records of the United Sta	ites Parent and Tracemark	Office.	are applicant, a logi	stered attorney or agent; or t	no acordines or other party lit
Authorized Signature Julinia Latural Date 7/9/10						
	· Frederick				lo. 34,715	
This collection of inform an application. Confiden submitting the complete this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	ation is required by 37 Ctiality is governed by 35 I application form to the ons for reducing this builtinginia 22313-1450. DC 13-1450.	CFR 1.311. The information U.S.C. 122 and 37 CFR at USPTO. Time will vary orden, should be sent to the DNOT SEND FEES OR	on is required to obtain or 1.14. This collection is es depending upon the indice Chief Information Offic COMPLETED FORMS 1	retain a benefit by t stimated to take 12 i vidual case. Any co er, U.S. Patent and O THIS ADDRESS	he public which is to file (an minutes to complete, includi mments on the amount of ti Trademark Office, U.S. Dep 3. SEND TO: Commissioner	d by the USPTO to process) ng gathering, preparing, and me you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.